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PTO/SB/96 (11-96)

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Application Number	10/77,892
Filing Date	11/20/2003
First Named Inventor	Koch
Art Unit	2642
Examiner Name	DESIR
Attorney Docket Number	B302301 CONA

I hereby revoke all previous powers of attorney given in the above-identified application.

☒ A Power of Attorney is submitted herewith.

OR

☐ I hereby appoint the practitioners associated with the Customer Number: ☒ Please change the correspondence address for the above-identified application to:☒ The address associated with
Customer Number:38516

OR

☒ Firm or
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I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Name

Scott P. Zimmerman

Date

Telephone

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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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&
37 C.F.R. § 3.73 EXCLUSION OF INVENTIVE ENTITY**

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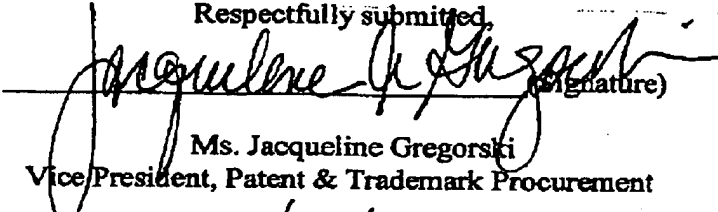
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06/05/2007 (Date)

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